

Judge	Recd Date	Grv.
M		

For use by inmates in filing a complaint under CIVIL RIGHTS ACT, 42 USC §1983

INMATE NAME: Steven Anthony Langley

PRISONER NO.: 11939810

PLACE OF CONFINEMENT: D417

IN THE UNITED STATES DISTRICT COURT  
FOR THE WESTERN DISTRICT OF VIRGINIA  
ROANOKE DIVISION

CLERK'S OFFICE U.S. DIST. COURT  
AT ROANOKE, VA  
FILED

FEB 28 2019

Steven Anthony Langley  
Enter Full Name Plaintiff

JULIA C. DUDLEY, CLERK  
BY: Seagle  
DEPUTY CLERK

vs.

CIVIL ACTION NO. 7:19-cv-00201

Doc Food Service, At Wallens Ridge state prison  
Enter Full Name(s) Defendant(s)

A. Have you begun other actions in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes  No

B. If your answer to A is Yes, describe the action in the space below.

1. Parties to the Action: \_\_\_\_\_

\_\_\_\_\_

2. Court: \_\_\_\_\_

\_\_\_\_\_

3. Docket No.: \_\_\_\_\_

\_\_\_\_\_

4. Judge: \_\_\_\_\_

\_\_\_\_\_

5. Disposition: \_\_\_\_\_

(For example, is the case still pending? If not, what was the ruling? Was the case appealed?)

C. Have you filed any grievances regarding the facts of your complaint?

Yes  No

1. If your answer is Yes, complete the enclosed verified statement, indicating the result. Please attach evidence of your exhaustion of all available grievance procedures.

\_\_\_\_\_

2. If your answer is No, indicate the reason for failure to exhaust on the verified statement. You may be required to exhaust your claims through any applicable grievance procedures. Your complaint may be dismissed if you fail to exhaust all avenues of the grievance process in a timely fashion.

- D. Statement of Claim - State here briefly the facts of your case. Describe what action(s) each defendant took in violation of your constitutional rights. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of different claims, number and set forth each claim in a separate paragraph. Use as much space as needed. You may attach extra paper if necessary.

Claim #1 - Supporting Facts - Tell your story briefly without citing cases or law.

I well sense I arring at wallens ridge state prison in July of 2016 Food service refuse to feed me and other inmates at this prison 2,701 Calories which is food service policy

Claim #2 - Supporting Facts - Tell your story briefly without citing cases or law.

I have lost humaros weight sense I arrive at this prison and you can surpose my medical record to see how much weight I have lost

Claim #3 - Supporting Facts - Tell your story briefly without citing cases or law.

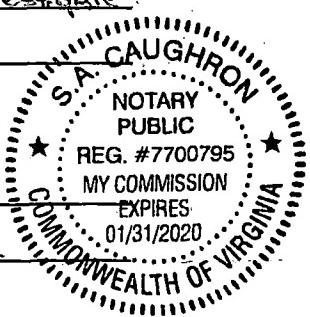
- E. State what relief you seek from the Court. Make no legal arguments, cite no cases or statutes.

I would like for the courts to send someone to investigate food service and I will like a 2001000

City, County of Wise  
SIGNED DEPT OF CORRECTIONS DAY OF February 20, 2019  
Commonwealth of Virginia Department Corrections  
Subscribed and Sworn Before me this 15 day  
of February 2019, by  
Notary Public S.A. Caughron  
My Commission Expires 01-31-2020

(Signature of Each Plaintiff)

Steven Anthony Landley



VERIFICATION:

I, Steven Anthony Landley, state that I am the plaintiff in this action and I know the content of the above complaint; that it is true of my own knowledge, except as to those matters that are stated to be based on information and belief, and as to those matters, I believe them to be true. I further state that I believe the factual assertions are sufficient to support a claim of violation of constitutional rights. Further, I verify that I am aware of the provisions set forth in 28 USC §1915 that prohibit an inmate from filing a civil action or appeal, if the prisoner has, three or more occasions, while incarcerated, brought an action or appeal in federal court that are dismissed on the grounds that it was frivolous, malicious or failed to state a claim upon which relief may be granted, unless the prisoner is in imminent danger of serious physical injury. I understand that if this complaint is dismissed on any of the above grounds, I may be prohibited from filing any future actions without the pre-payment of filing fees.

I declare under penalty of perjury the foregoing to be true and correct.

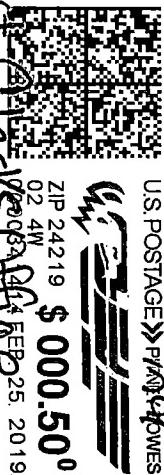
DATED: \_\_\_\_\_ SIGNED: Steven Landley

Slangley 1193986

WALLENS RIDGE STATE PRISON

P.O. BOX 759

BIG STONE GAP VA 24219



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US District Court Clerk's Office

10 Franklin Rd

SW Suite 550

Roanoke VA 24011-2280